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Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

**DEPARTMENT OF HEALTH CARE SERVICES (DHCS)
California Children's Services (CCS)
Monitoring and Oversight Workgroup
July 25, 2022
12 p.m. – 4 p.m.**

MEETING SUMMARY

CCS Monitoring and Oversight Workgroup Members Attended:

Alicia Emanuel; Anna Leach-Proffer; Beverly Eldridge; Dawn Pacheco; Farrah McDaid-Ting; Francis Chan, MD; Guillermina (Mina) Andres; Hannah Awai, MD; Janet Peck; Jennifer Macievich; Jody Martin; Katherine Barresi; Katie Schlageter; Kristen Dimou; Lori Gardner; Lorri McKey; Meredith Wolfe; Michelle Gibbons; Michelle Laba, MD; Mike Odeh; Nancy Netherland; Norma Williams; Susan Skotzke; Tanesha Castaneda

CCS Monitoring and Oversight Workgroup Members that Did Not Attend:

Eileen (Chris) McSorley; Holly Henry; Kathryn Smith; Mary Doyle, MD; Pip Marks; Richard Chinnock, MD; Teresa Jurado

DHCS Staff Attended: Ami Lovato; Annette Lee; Cheryl Walker, MD; Jill Abramson, MD; Joseph Billingsley; Katie Ramsey; Michael Luu; Susan Philip

DHCS Consultants, Sellers Dorsey Attended: Alex Kanemaru; Marisa Luera; Meredith Wurden

Public Attended: 37

CCS Monitoring and Oversight Workgroup Materials: Agenda, Slide Deck, and CCS Monitoring and Oversight Program Plan

I. Welcome and Meeting Information

Meredith Wurden, DHCS Consultant with Sellers Dorsey

Welcomed members and shared meeting information

Alex Kanemaru, DHCS Consultant with Sellers Dorsey

Reviewed housekeeping items

II. Roll Call

Meredith Wurden

Conducted roll call of CCS Monitoring and Oversight Workgroup members, DHCS staff, and the Sellers Dorsey team

III. June Meeting Summary and Program Policy Updates

Alex Kanemaru

Provided June meeting summary, highlighted workgroup feedback incorporated into this presentation, and reviewed June homework items

***Susan Philip, Deputy Director
Health Care Delivery Systems***

Provided overview of program policy updates including Kaiser Permanente implementing the CCS Whole Child Model (WCM) in applicable counties; Kaiser Direct Contract Memo; and Assembly Bill 2724, Arambula (Chapter 73, Statutes of 2022)

Summary of Discussion:

- Members asked about the implementation process, timeline, and what counties can expect for this transition
 - **Response:** DHCS is working through the operational questions. Implementation is projected for 2024 and DHCS will update the CCS Monitoring and Oversight Workgroup when additional details are available
- Members commented families may have many questions and suggested DHCS create a “frequently asked questions” document for families
 - **Response:** DHCS will take this into consideration

IV. Landscape Review

Marisa Luera, DHCS Consultant with Sellers Dorsey

Provided landscape review updates including CCS program roles and responsibilities matrix and CCS program definitions

**Joseph Billingsley, Assistant Deputy Director
Integrated Systems**

Reviewed the process for developing a case management definition

Summary Discussion:

- Members asked what the timeline for developing and distributing the case management definition is
 - **Response:** DHCS will continue to provide updates and work towards having more information developed to share with the workgroup
- Members asked if the process moving forward would include a group of individuals familiar with what is currently occurring in CCS case management to establish the definition
 - **Response:** DHCS is looking at what definitions are already available, utilizing the quality and population health management framework, and taking all pieces into account including previous stakeholder input to provide a clear definition
- Members asked for clarification whether the definition is for CCS case management or Enhanced Care Management (ECM), and expressed case management should be for the CCS condition
 - **Response:** DHCS is working to have a clear distinction between CCS case management and ECM
- Members asked if counties will be included in the process of developing a CCS case management definition
 - **Response:** Yes, DHCS worked with multiple stakeholders including the CCS counties to create the definitions
- Members requested definitions on slide 19 to include: CCS case management, ECM care management, and CCS or CalAIM care coordination
 - **Response:** DHCS appreciates the feedback and acknowledges the importance of distinction around each of the definitions

**V. Compliance Program Development
Meredith Wurden**

Reviewed elements of compliance program and framework plan

Susan Philip

Discussed monitoring and oversight in managed care

Meredith Wurden

Provided overview of initial compliance program feedback and draft of proposed CCS Monitoring and Oversight Program Plan

Summary of Discussion:

- Members requested workgroup materials be posted more than two (2) working days prior to workgroup meeting
 - **Response:** DHCS is working to post in advance as much as possible, but the plan is to walk members through the materials during the meeting
- Members asked if managed care plans (MCP) could be brought into the updates as counties rely on them for certain information; explained the importance of point people for DHCS, MCPs and the state; and in ensuring all affected parties are involved
 - **Response:** DHCS will take this into consideration
 - **Action Item:** Ensure the program plan aligns with managed care, as applicable
- Members expressed the importance of grievance reporting, clarity of program responsibilities, and allowing opportunities for training before new state requirements are imposed
 - **Response:** DHCS will take this into consideration
- Members asked if the compliance program will continuously be evaluated
 - **Response:** The compliance plan will be updated and evaluated on an ongoing basis
- Members explained as an MCP, they pull out data specifically on CCS WCM beneficiaries and report on it quarterly to obtain a pulse check and share the data with the pediatric quality committee. These feedback loops allow the MCP to obtain concise data about beneficiary grievances and pivot as necessary.
 - **Response:** DHCS will take this into consideration

VI. Break
Meredith Wurden

A 10-minute break commenced

VII. Performance Metrics and Review Process
Marisa Luera

Discussed proposed DHCS and county requirements for performance metrics, domains, measure selection criteria, Plan and Fiscal Guidelines (PFG) performance measures, initial feedback on existing PFG performance measures, discussion questions, and opened the floor for workgroup discussion

Summary of Discussion:

- Members requested a high-level chart/list of all workgroup feedback
 - **Response:** DHCS will consider a summary of feedback received

- Members expressed the importance and appreciation for family satisfaction in the performance measures
 - **Response:** DHCS acknowledges the importance and will take this into consideration
- Members asked for coordination, collaboration, and cooperation with the MCPs, and their roles and responsibilities be included into the framework for performance measures
 - **Response:** DHCS will take this into consideration
- Members expressed performance measures should be based on different county models, and who is responsible for the work
 - **Response:** DHCS will take this into consideration
- Members requested DHCS consider making some of the performance measures optional, such as family participation, due to county disparities and some families do not have the means to participate
 - **Response:** DHCS will take this into consideration
- Members requested to add Medical Therapy Units (MTU) to the performance measures to ensure children have access to medical equipment like wheelchairs
 - **Response:** DHCS will take this into consideration
- Members asked what flexibilities are available in Children’s Medical Services (CMS) Net to create opportunities for enhanced data collection
 - **Response:** This is a possibility identified as part of the landscape review and is under discussion. It would also be helpful to have concrete examples provided to DHCS.
- Members liked the domains, however, have concerns about the existing performance measures as some are hard for counties to meet as they are out of their hands, like medical homes and family participation. Members requested to create new performance measures instead of using the old ones.
 - **Response:** It is important to review what already exists, then move from there on what needs to be modified, deleted, or added
- Members expressed medical homes are essential and family participation is important to allow families to participate and provide feedback on areas of improvement and need
 - **Response:** DHCS will take this into consideration
- Members expressed the need to define roles and responsibilities for the performance measures based on county model types, the differences in the counties (for example the system collecting data may be different for each county), ensuring data points are reflective of Title 22 guidelines, and disparities amongst the counties and accounting for due diligence made in meeting the performance measures
 - **Response:** DHCS will take this into consideration
- Members expressed in the smaller, rural counties, nursing staff perform multiple roles making it difficult to perform transition planning, family participation, medical homes, and determining CCS eligibility; this should be taken into consideration

- **Response:** This will be an ongoing discussion

VIII. Memorandum of Understanding (MOU) Development

***Katie Ramsey, Chief
County Compliance Unit***

Reviewed the MOU structure, proposed MOU outline, and draft roles and responsibilities information

Meredith Wurden

Reviewed discussion questions and opened the floor for workgroup discussion

Summary of Discussion:

- Workgroup members stated in the Division of Responsibilities chart, Annual Medical Reviews could be a county or state responsibility and needs to be further refined
 - **Response:** That is helpful for building out this document and eventually it will go into the level of detail needed for the MOU

IX. Public Comment

Meredith Wurden

No public comments received

X. Next Steps

Meredith Wurden

Provided information on next steps

Summary Discussion:

- Members expressed hoping to have family engagement centers at school campuses along with MTUs
 - **Response:** DHCS will take this into consideration

Meeting adjourned at 3:02 p.m.